Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09761398

CLAIMS AS FILED - PAF (Column 1)					(Column 2)			SMALL ENTITY TYPE			OR SMALL ENTITY	
TOTAL CLAIMS							Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS) / minus 20=		• 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS) minus 3 =		. 0			X40=		OR	X80=	
MUI	TIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, ente	"0" in column 2			TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II								CMALLE	AITITV	OD.	OTHER SMALL	
, ,		(Column 1) CLAIMS		(Colui		(Column 3)	1 -	SMALL E		OR I I	SIVIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	. 14	Minus		<u> </u>	=		X\$ 9=	<i></i>	OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	TCLAIM	[=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	OLTIPLE DEF	ENDEN	CLANVI		'	+135=		OR	+270=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 14	Minus	" ~	0	=	<u> </u>	X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***	3]=/	11	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	OLTIPLE DEF	PENDEN	CLAIM		┙╏	+135=		OR	+270=	
•							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT C	Total	. 14	Minus	"0	3 0	=	11	X\$ 9=		ÓR	X\$18=	
	Independent	*	Minus	***	B	=/	4 [X40=		OR	X80≤	
L	FIRST PRESENTATION OF MOLTIFLE DEPENDENT CLAIM							+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	TOTAL ADDIT. FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I							SMALL ENTITY				OTHER THAN	
			(Column 1)		(Column 2)		T	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS							ſ	RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=	
<u> </u>	EPENDENT CL			nus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	_	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II							•			OTHER	THAN	
(Column 1) (Column 2) (Column 3						(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 14	Minus	** 6	20	=		X\$ 9=		OR	X\$18=	
AME	Independent	* /	Minus	*** C	3	[X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
							L	TOTAL ADDIT. FEE	—	OR	TOTAL ADDIT. FEE	·
		(Column 1)		(Colu	mn 2)	(Column 3)		10011.1 EE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus ,	***	T OL ALLA	=		X42=		OR	X84=	
_	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	I CLAIM			+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	,	10011.1 C.C.		•	ADDII. 1 EE	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT C	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL AILA		Ī	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\	+140=		OR	+280=	
	If the entry in colu	mn 1 is less than t	he entry in colu	mn 2, writ	te "0" in co	lumn 3.	L	TOTAL			TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												